## AGREEMENT FOR REIMBURSEMENT OF MOVING EXPENSES

THIS AGREEMENT is made	and entered	into by and between			
		(Name of Agency)			
at(Location of Position)	, an ago	ency of the State of Kansa	as, Party of	the First Part, l	nereinafter called
(Location of Position)					
Agency, and			, of		
Agency, and(Name of E	mployee)	(Social Security Nun	mber)	(City and St	ate)
Party of the Second Part, herei	nafter called	Employee.			
WITNESSETH: That					
WHEREAS, the Agency has e	ngaged/trans	ferred employee as		a	nd employee has
accepted such employment/tra	nsfer which l	became effective;			and
			(Effect	ive Date)	
As a condition of this Agreeme the beginning date of employn acceptable to the agency conce for moving and relocation expensetoff by the state against such 75-3207.	nent/transfer, rned, such er enses and suc	unless separated for reas imployee will reimburse to the obligation to so repay si	sons beyond the Agency shall constit	I the employee the full amour ute and be cons	s control that are at paid to him/her didered a lien and
WITNESS our hands this		day of			
	Ву:		gency ted Official the First Par		
		Em <sub>j</sub> (Party of th	ployee ne Second F	Part)	